Internal Revenue Service

### **IRS e-file Signature Authorization**

ERO must obtain and retain completed Form 8879. ► Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

T.....

Taxpayer's name	Social security number					
MAHESH RAVI	805-52-2156					
Spouse's name	Spouse's social security number					
Part I Tax Return Information – Tax Year Ending December 31, 2021 (Enter	year you are authorizing.)					
Enter whole dollars only on lines 1 through 5.	year you are authorizing.					
<b>Note:</b> Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.						
<b>1</b> Adjusted gross income	<b>1</b>   108,203.					
<b>2</b> Total tax	<b>. 2</b> 16,236.					
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	<b>3</b> 17,001.					
4 Amount you want refunded to you	<b>4</b> 765.					
<b>5</b> Amount you owe	5					
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)						

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537**. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

#### Taxpayer's PIN: check one box only

X	I authorize	GLOBAL TAXES	LLC	to enter or generate my PIN
			ERO firm name	

2	2	1	5	6	00 mV
Ent don	er fiv i't er	/e di nter a	gits, all ze	but ros	as my

signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature 🕨

Date 🕨

#### Spouse's PIN: check one box only

I authorize

to	enter	or	generate	my	PIN

as mv Enter five digits, but don't enter all zeros

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's s	signature 🕨 🛛 🖸	ate							 
	Practitioner PIN Method Returns Only—continue	e bel	ow						
Part III	Certification and Authentication – Practitioner PIN Method Only								
ERO's EFI	<b>N/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN.	5	8	7		8 nter a	all zer		

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature >		Date 🕨	
Dor	ERO Must Retain This F n't Submit This Form to the I		
For Department Poduction Act Natio	a and your tox return instructions	 REV/ 02/11/22 RRO	Earm 8879 (Pay, 01 2021)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 02/11/22 PRO

<b>1040</b>	-NR Departm	nent of the Treasury-I Nonresident	Internal Revenue Service Alien Income Tax	(99) <b>Return</b>	2021	OMB No. 15	45-0074	IRS Use Only-Do not write or staple in this space.
Filing Status Check only one box.	Single Single	_	separately (MFS)	7	ı widow(er) (QW)	)		
Your first name and middle initial     Last name     Your identify (see instruction 805-52-							-52-2156	
City, town, or post office. If you have a foreign address, also complete spaces below.     State     ZIP code       DULUTH     GA     30097       Foreign country name     Foreign province/state/county     Foreign postal code								
At any time durir	ng 2021, did you re	eceive, sell, exchang	e, or otherwise dispose of	any financia	al interest in any	virtual curre	ncy?	🗌 Yes 🛛 No

<b>Dependents</b>					(-) -		(4) 🗸	if qualifie	es for (see inst.):
(see instructions):		(1) First name	Last name	(2) Dependent's identifying number		ependent's Iship to you	Child tax	c credit	Credit for other dependents
16								]	
If more than four dependents, see								]	
instructions and								]	
check here ►								]	
Income	1a	Wages, salaries, tips, e	tc. Attach Form(s) W-	-2				1a	108,971.
Effectively	b	Scholarship and fellows	ship grants. Attach Fo	orm(s) 1042-S or required	d statemei	nt. See instruc	tions .	1b	
Connected	с	Total income exempt b	y a treaty from Sche	edule OI (Form 1040-NR)	), Item				
With U.S.		L, line 1(e)				1c			
Trade or	2a	Tax-exempt interest .	2a	b Tax	able inter	est		2b	
Business	3a	Qualified dividends .	3a	136. <b>b</b> Orc	dinary divid	dends		3b	136.
	4a	IRA distributions	<u>4a</u>	b Tax	able amo	unt		4b	
	5a	Pensions and annuities	<u>5</u> a	b Tax	able amo	unt		5b	
	6	Reserved for future use						6	
	7	Capital gain or (loss). A	ttach Schedule D (Fo	rm 1040) if required. If no	ot required	l, check here		7	11,596.
	8	Other income from Sch	edule 1 (Form 1040),	line 10				8	-12,500.
	9	Add lines 1a, 1b, 2b, 3b	o, 4b, 5b, 7, and 8. Th	nis is your total effective	ely connec	ted income	. 🕨	9	108,203.
	10	Adjustments to income	:						
	а	From Schedule 1 (Form	1040), line 26		L	l0a			
	b	Reserved for future use			L	l0b			
	с	Scholarship and fellows	ship grants excluded		L	10c			
	d	Add lines 10a and 10c.	These are your total	adjustments to income	ə		. 🕨	10d	
	11	Subtract line 10d from	line 9. This is your <b>ad</b>	justed gross income	<sub>.</sub>		. 🕨	11	108,203.
	12a	Itemized deductions	(from Schedule A (F	orm 1040-NR)) or, for o	certain				
		residents of India, stand	dard deduction. See i	instructions Std.Dedn US/Indi	.a Treaty 🔤	1 <b>2a</b> 11	2,550.		
	b	Charitable contributions	s for certain residents	of India. See instructions	s	l2b	300.		
	с	Add lines 12a and 12b			<sub>.</sub>			12c	12,850.
	13a	Qualified business inco	me deduction from F	orm 8995 or Form 8995-	A.	13a			
	b	Exemptions for estates	and trusts only. See	instructions	🗠	I3b			
	С	Add lines 13a and 13b						13c	
	14	Add lines 12c and 13c						14	12,850.
	15	Taxable income. Subt	ract line 14 from line	11. If zero or less, enter -	-0			15	95,353.
For Disclosure,	Priva	cy Act, and Paperwork R	eduction Act Notice,	see separate instruction	IS.	BAA REV C	2/11/22 PRO	For	rm <b>1040-NR</b> (2021)

Form 1040-NR (	2021)								Page 2
	16	Tax (see instructions). Check if	any from Form	i(s): <b>1</b> 🗌 88	814 <b>2</b> 🗌 497	2 <b>3</b>		16	16,236.
	17	Amount from Schedule 2 (Forr	n 1040), line 3					17	0.
	18	Add lines 16 and 17						18	16,236.
	19	Nonrefundable child tax credit	or credit for o	other depender	nts from Schedule	8812 (Form 104	0)	19	
	20	Amount from Schedule 3 (Forr	n 1040), line 8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18. I	f zero or less,	enter -0-				22	16,236.
	<b>23</b> a	Tax on income not effectively from Schedule NEC (Form 104				23a	12		
	b	Other taxes, including self-em line 21				23b			
	С	Transportation tax (see instruc	tions)			23c			
	d	Add lines 23a through 23c .						23d	
	24	Add lines 22 and 23d. This is y	our <b>total tax</b>				🕨	24	16,236.
	25	Federal income tax withheld fr	om:						
	а	Form(s) W-2				<b>25</b> a 1	7,001.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions)				25c			
	d	Add lines 25a through 25c .						25d	17,001.
	е	Form(s) 8805						25e	
	f	Form(s) 8288-A						25f	
	g	Form(s) 1042-S						25g	
	26	2021 estimated tax payments	and amount a	pplied from 20	)20 return			26	
	27	Reserved for future use				27			
	28	Refundable child tax credit o 8812 (Form 1040)			t from Schedule	28			
	29	Credit for amount paid with Fo	orm 1040-C			29			
	30	Reserved for future use				30			
	31	Amount from Schedule 3 (Forr	n 1040), line 1	5		31			
	32 33	Add lines 28, 29, and 31. Thes Add lines 25d, 25e, 25f, 25g, 2						32 33	17,001.
Refund	34	If line 33 is more than line 24,	subtract line 2	4 from line 33.	This is the amour	nt you <b>overpaid</b>		34	765.
	35a	Amount of line 34 you want re			3 is attached, cheo	khere	. 🕨 🔽	35a	765.
Direct deposit?	►b	Routing number 1 1 1	0 0 0 6	5 1 4	🕨 c Type: 🛛 🗙	Checking	Savings		
See instructions.	►d	Account number 9 1 1	5 0 7 3	3 7 9					
	►e	If you want your refund check enter it here.			de the United Stat	es not shown or	n page 1,		
	36	Amount of line 34 you want ap				36			
Amount	37	Amount you owe. Subtract lir	ne 33 from line	24. For detail	s on how to pay, s	ee instructions	. 🕨	37	
You Owe	38	Estimated tax penalty (see inst	tructions) .		🕨	38			
Third Party Designee	-	rou want to allow another astructions	person to di 	iscuss this r	eturn with the		Complete	below.	X No
	Desig name	nee's ▶		Phone no. ▶			nal identifi er (PIN)	cation ▶	
Sign		penalties of perjury, I declare that I							
Here	belief,	they are true, correct, and complete	. Declaration of	preparer (other t	han taxpayer) is bas	ed on all information			, ,
TIELE	Your	signature		Date	Your occupation				nt you an Identity
					SOFTWARE E			inst.) ►	N, enter it here
	Dhon	2.22		Email addres		INGINEER	(300)	1131.)	
	Phone	irer's name	Preparer's si		5	Date	PTIN		Check if:
Paid	•			0	מווסיית האדדאא	02/21/2022	P02082		Self-employed
Preparer		PRIYA RAM SAGAR GUPTA TALLAM		A RAPI SAGAR	GUFIA IALLAM				
Use Only		s name GLOBAL TAXES		n Course	~ (7) 20041			-	<u>8)965-9522</u> )-1017196
Go to wave in		s address > 2530 Pebble			9 GA 30041				rm <b>1040-NR</b> (2021)
	900701	and the	acarnionia		1 F	REV 02/11/22 PF		For	ייי <b>ועדע־ואה</b> (2021)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

# Additional Income and Adjustments to Income

Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074

Internal Revenue Service	► Go to www.irs.gov/Form1040 fe
Name(s) shown on Fo	orm 1040, 1040-SR, or 1040-NR
MAHESH RAVI	

Your social security number 805-52-2156

### Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxe			1	
2a	Alimony received		· · ·	2a	
b	Date of original divorce or separation agreement (see instructions)				
3	Business income or (loss). Attach Schedule C			3	
4	Other gains or (losses). Attach Form 4797			4	
5	Rental real estate, royalties, partnerships, S corporations, tr Schedule E			5	-12,500.
6	Farm income or (loss). Attach Schedule F			6	
7	Unemployment compensation			7	
8	Other income:				
а	Net operating loss	8a (	)		
b	Gambling income	8b			
С	Cancellation of debt	8c		-	
d	Foreign earned income exclusion from Form 2555	8d (	)		
е	Taxable Health Savings Account distribution	8e		-	
f	Alaska Permanent Fund dividends	8f			
g	Jury duty pay	8g			
h	Prizes and awards	8h			С
i	Activity not engaged in for profit income	8i		-	
j	Stock options	8j			
k	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such				
	property	8k			
Т	Olympic and Paralympic medals and USOC prize money (see				
	instructions)	81		-	
m	Section 951(a) inclusion (see instructions)	8m		-	
n	Section 951A(a) inclusion (see instructions)	8n		-	
0	Section 461(I) excess business loss adjustment	80		-	
р	Taxable distributions from an ABLE account (see instructions) .	8p		-	
Z	Other income. List type and amount ►	0-			
0	Total other income. Add lines %s through %z	8z		0	
9 10	Total other income. Add lines 8a through 8z	040 1040.	SB or	9	
	1040-NR, line 8			10	-12,500.
For Pa	perwork Reduction Act Notice, see your tax return instructions.			Schedu	le 1 (Form 1040) 2021

Par	Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-officials. Attach Form 2106	•	12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form	3903	14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
b	Recipient's SSN	►		
С	Date of original divorce or separation agreement (see instructions)	•		
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
а	Jury duty pay (see instructions)	24a		
b	Deductible expenses related to income reported on line 8k from	O (h		
	the rental of personal property engaged in for profit Nontaxable amount of the value of Olympic and Paralympic	24b		
C		24c		с
d	Reforestation amortization and expenses	24d		
е	Repayment of supplemental unemployment benefits under the	04.5		
		24e		
	Contributions to section 501(c)(18)(D) pension plans	24f		
g b	Contributions by certain chaplains to section 403(b) plans Attorney fees and court costs for actions involving certain	24g		
		24h		
i	Attorney fees and court costs you paid in connection with an			
	award from the IRS for information you provided that helped the IRS detect tax law violations	24i		
i	Housing deduction from Form 2555	24j		
, k	Excess deductions of section 67(e) expenses from Schedule K-1	<u></u>		
		24k		
z	Other adjustments. List type and amount ►			
•-		24z		
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your <b>adjustments</b> there and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line		26	

#### SCHEDULE NEC (Form 1040-NR)

MAHESH RAVI

# Tax on Income Not Effectively Connected With a U.S. Trade or Business

OMB No. 1545-0074

21

20

Attachment

Department of the Treasury Internal Revenue Service (99) ► Go to www.irs.gov/Form1040NR for instructions and the latest information. ► Attach to Form 1040-NR.

Sequence No. 7B Your identifying number

805-52-2156

Name shown on Form 1040-NR

Enter	amount of income und	er the appropriate rat	e of tax. See instructions.				-	1		
		Nature of	Income			<b>(a)</b> 10%	<b>(b)</b> 15%	(c) 30%	(d) Other	r (specify)
								.,	%	%
1	Dividends and divide									
а	Dividends paid by U				1a					
b		•			1b					
С	Dividend equivalent p	ayments received w	th respect to section 871(n	n) transactions	1c					
2	Interest:									
а		Mortgage								
b		Paid by foreign corporations								
С	Other									
3	<b>,</b> (1		etc.)		3					
4					4					
5			ublishing, etc.)		5					
6	Real property income and natural resources royalties				6					
7	Pensions and annuit	es			7					
8	Social security benef	ïts			8					
9					9					
10	If zero or less, ente	r <b>-0</b>	nter net income in columr	n (c).						
а	Winnings									
b	Losses				10c					
11			ries other than Canada.		11					
12	Other (specify) ►									
13	_		nrough (d)		13					
14			each column		14					
15	Tax on income not ef	fectively connected	with a U.S. trade or busine						NR, line 23a 🕨   15	
			Capital Gains a	and Losses	From	Sales or Excha	anges of Proper	ty		1
Enter only the capital gains and losses from property sales or exchanges that are from sources within the United States and not		(if necessar	roperty and description y, attach statement of etails not shown below)	<b>(b)</b> Date acquire mm/dd/yyyy		(c) Date sold mm/dd/yyyy	(d) Sales price	(e) Cost or other basis	(f) LOSS If (e) is more than (d), subtract (d) from (e).	(g) GAIN If (d) is more than (e), subtract (e) from (d).
effectiv	ely connected with a U.S.									
or loss on disposing of a U.S. real property interest; report these										
	nd losses on Schedule D									
Report	property sales or									
	ges that are effectively ted with a U.S. business		(f) and (a) of line 10							
on Sch	edule D (Form 1040),		(f) and (g) of line 16 . . Combine columns (f) ar	 nd (a) of line 1	 7 Ento	 In the net gain be		<b>17</b>		+
	797, or both.				. Linte		02/11/22 PRO			
FOL Da	aperwork neduction A	c notice, see the in	structions for Form 1040-	ND.		REV	02/11/22 FRU		Schedule NEC	C (Form 1040-NR) 2021

SCHE	DULE	ΟΙ
(Form	1040-N	IR)

## **Other Information**

OMB No. 1545-0074 

Go to www.irs.gov/Form1040NR for	instructions and the late	st information.
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(	,	► Go	to www.irs.gov/Form1040		d the latest information	1.	207	27		
	ent of the Treasury Revenue Service (99)			ch to Form 1040-NR. swer all questions.			Attachment Sequence N	o 7C		
	nown on Form 1040	-NR				Your identify				
MAHE	SH RAVI					805-52-	-2156			
Α	Of what country	/ or countries v	vere you a citizen or nation	al during the tax year?	INDIA					
В	In what country	did you claim	residence for tax purpose	s during the tax year?	United States					
С	Have you ever a	applied to be a	green card holder (lawful p	permanent resident) of	the United States? .		. 🗌 Yes	🛛 No		
D	A green card holder (lawful permanent resident) of the United States?									
	A U.S. citizen?									
2.						• • •	. Yes	X No		
Е	-		day of the tax year, enter y			ter vour 11.9	5			
-	immigration stat	tus on the last of	day of the tax year. <u>F1</u>				J.			
F	Have you ever of	changed your v	/isa type (nonimmigrant sta	itus) or U.S. immigratic	on status?		. 🗌 Yes	X No		
~	If you answered	I "Yes," indicat	te the date and nature of th	e change						
G			left the United States durin Canada or Mexico AND co	•		iont intonvol	<b>^</b>			
			r <b>Mexico</b> and skip to item I							
	Date entered		Date departed United Stat		te entered United State	s Date d	eparted Unite	d States		
	mm/c	ld/yy	mm/dd/yy		mm/dd/yy		mm/dd/yy			
н	Give number of	davs (including	vacation, nonworkdays, and	d partial days) you were	present in the United	 States durinu	a.			
			, 2020				3.			
I.			return for any prior year? .				. XYes	No		
			nd form number you filed 🕨							
J			st?					🗙 No		
			U.S. or foreign owner under ribution from a U.S. persor					No		
к			sation of \$250,000 or more							
ĸ	-		ative method to determine							
L			f you are claiming exempt					country,		
	complete (1) thr	ough (3) below	. See Pub. 901 for more in	formation on tax treation	es.					
1.			the applicable tax treaty an ne columns below. Attach F			claimed the	treaty benef	it, and the		
		(a) Cou		(b) Tax treaty article	(c) Number of month	15 <b>(d)</b>	Amount of ex	empt		
		(-)			claimed in prior tax ye		ne in current t			
	(e) Total. Enter	this amount o	n Form 1040-NR, line 1c. [	Do not enter it on line 1	a or line 1b					
2.	Were you subje	ct to tax in a fo	preign country on any of the	e income shown in 1(d)	) above?		. 🗌 Yes	No		
3.	-		ts pursuant to a Competen				. 🗌 Yes	🗙 No		
			Competent Authority deter	mination letter to your i	return.					
M	Check the appli		aking an election to treat it	nome from real prope	rty located in the Linit	od Statoo oc	offootivolve	opposted		
1.			aking an election to treat ir under section 871(d). See i							

2. You have made an election in a previous year that has not been revoked, to treat income from real property located in the United States as effectively connected with a U.S. trade or business under section 871(d). See instructions . . . . . . . . . . . . . . . . . .

For Paperwork Reduction Act Notice, see the Instructions for Form 1040-NR.

REV 02/11/22 PRO Schedule OI (Form 1040-NR) 2021

# SCHEDULE D

(Form 1040)

# **Capital Gains and Losses**

OMB No. 1545-0074

Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/ScheduleD for instructions and the latest information.
 Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

2021 Attachment Sequence No. 12

Name(s) shown on return MAHESH RAVI

Department of the Treasury

Internal Revenue Service (99)

Your social security number 805-52-2156

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? 
Yes X No
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

### Part I Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less (see instructions)

lines This	instructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to e dollars.	<b>(d)</b> Proceeds (sales price)	<b>(e)</b> Cost (or other basis)	(g) Adjustments to gain or loss fi Form(s) 8949, Pa line 2, column	rom art I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.				(9)	
1b	Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked	14,480.	10,169.			4,311.
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked					
3	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked					
4	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1		5			
6	Short-term capital loss carryover. Enter the amount, if an <b>Worksheet</b> in the instructions		6	( )		
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise	•	· / ·		7	4,311.

#### Part II Long-Term Capital Gains and Losses – Generally Assets Held More Than One Year (see instructions)

See instructions for how to figure the amounts to enter on the lines below.		(d) Proceeds	(e) Cost	<b>(g)</b> Adjustmen to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and
This form may be easier to complete if you round off cents to whole dollars.		(sales price)	(or other basis)	Form(s) 8949, I line 2, colum	Part II,	combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
8b	Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked	15,301.	8,016.			7,285.
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked					
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked.					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824	11				
12	Net long-term gain or (loss) from partnerships, S corporat	12				
13	Capital gain distributions. See the instructions	13				
14	Long-term capital loss carryover. Enter the amount, if any					
	Worksheet in the instructions				14	()
15	Net long-term capital gain or (loss). Combine lines 8a on the back				15	7,285.

For Paperwork Reduction Act Notice, see your tax return instructions.

BAA REV 02/11/22 PRO

Part	III Summary	
16	Combine lines 7 and 15 and enter the result	<b>16</b> 11,596.
	• If line 16 is a <b>gain,</b> enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.	
	• If line 16 is a <b>loss</b> , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.	
	• If line 16 is <b>zero</b> , skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.	
17	Are lines 15 and 16 <b>both</b> gains? X Yes. Go to line 18.	
	<b>No.</b> Skip lines 18 through 21, and go to line 22.	
18	If you are required to complete the <b>28% Rate Gain Worksheet</b> (see instructions), enter the amount, if any, from line 7 of that worksheet	18
19	If you are required to complete the <b>Unrecaptured Section 1250 Gain Worksheet</b> (see instructions), enter the amount, if any, from line 18 of that worksheet	19
20	<ul> <li>Are lines 18 and 19 both zero or blank and are you not filing Form 4952?</li> <li>Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. Don't complete lines 21 and 22 below.</li> </ul>	
	☐ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.	
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:	
	The loss on line 16; or     (\$3,000), or if married filing separately, (\$1,500)	21 ()
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.	
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?	
	☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16.	
	□ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.	

REV 02/11/22 PRO

Schedule D (Form 1040) 2021

# Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

Attachment

Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form8949 for instructions and the latest information.

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Social security number or taxpayer identification number

varie(s) shown on return	Social security number or tax
MAHESH RAVI	805-52-2156

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

**Note:** You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

X (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

C) Short-term transactions not reported to you on Form 1099-B

1 (a) Description of property	<b>(b)</b> Date acquired	(c) (d) Cost or other basis. e Date sold or Proceeds See the Note below See		If you enter an enter a co	f <b>any, to gain or loss</b> . amount in column (g), ode in column (f). <b>arate instructions.</b>	Gain or (loss). Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see <i>Column (e)</i> in the separate instructions	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g)
Robinhood Securities LLC	01/01/21	11/08/21	14,480.	10,169.			4,311.
2 Totals. Add the amounts in column negative amounts). Enter each to Schedule D, line 1b (if Box A abov above is checked), or line 3 (if Box	tal here and inc re is checked), <b>li</b> i	lude on your ne 2 (if Box B	14,480.	10,169.			4,311.

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

For Paperwork Reduction Act Notice, see your tax return instructions. BAA

Form 8949 (2021)	Attachment Sequence No. 12A	Page <b>2</b>
Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side	Social security number or taxpayer identification num	ber

	i on return.	Name	anu	0011 01	lan
MAHESH	RAVI				

805-52-2156

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

**Part II Long-Term.** Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

**Note:** You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

**(D)** Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

[] (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

(F) Long-term transactions not reported to you on Form 1099-B

<b>1</b> (a) Description of property	<b>(b)</b> Date acquired	<b>(c)</b> Date sold or	<b>(d)</b> Proceeds	<b>(e)</b> Cost or other basis. See the <b>Note</b> below	If you enter an enter a c	f any, to gain or loss. amount in column (g), ode in column (f). arate instructions.	<b>(h)</b> Gain or (loss). Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g)
Robinhood Securities LLC	01/01/20	11/05/21	15,301.	8,016.			7,285.
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked). or line 10 (if Box F above is checked) ►		15,301.	8,016.			7,285.	

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

SCHEDULE	Ε
(Form 1040)	

### **Supplemental Income and Loss**

OMB No. 1545-0074

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.
 Go to www.irs.gov/ScheduleE for instructions and the latest information.

2021 Attachment Sequence No. 13

Department of the Treasury Internal Revenue Service (99)

( )							Tour soci		•
	SH RAVI	<b>D</b> 1 <b>E</b> · · · · · · · · · · · · · · · · · · ·						2-215	*
Part		-	-	•			• •		
	Schedule C. See instructions. If y								
	d you make any payments in 2021 tha								
	Yes," did you or will you file required							. L Y	′es 🗌 No
<u>1a</u>	Physical address of each property								
	VIVEKANANDHA NAGAR HYDE	RABAD TELANGANA	A IN 5	00072					
C					Fair	Rental	Davaana		
1b	(from list bolow) above r	above report the number of fair rental and <b>Dave</b>					Personal Use QJ Days QJ		
A	2 if you me	use days. Check the detection of the set the requirements to joint venture. See instruction	QJV box	conly A		365	Day	0	
 	aualified	ioint venture. See inst	ructions	· B		305		0	
		,		C					
	of Property:			U					
		n/Short-Term Rental	5 Land		7 Self-	Rental			
	ti-Family Residence 4 Comme		6 Roya			er (describe)			
Incom		Properties:		A	0 0116	B			С
3	Rents received	•	3		600.				•
4	Royalties received		4						
Expen									
5	Advertising		5						
6	Auto and travel (see instructions) .		6						
7	Cleaning and maintenance		7	1	,500.				
8	Commissions		8						
9	Insurance		9						
10	Legal and other professional fees .		10						
11	Management fees		11	1	,000.				
12	Mortgage interest paid to banks, etc	c. (see instructions)	12						
13	Other interest		13						
14	Repairs		14	3	3,300.				
15	Supplies		15		3,300.				
16	Taxes		16						
17	Utilities		17	4	Ł,000.				
18	Depreciation expense or depletion		18						
19	Other (list) ►		19						
20	Total expenses. Add lines 5 through		20	13	3,100.				
21	Subtract line 20 from line 3 (rents) a								
	result is a (loss), see instructions to	-		1 0					
	file <b>Form 6198</b>		21	=12	2,500.				
22	Deductible rental real estate loss at		22 (	1 0	E00	(	`	(	`
23a	on <b>Form 8582</b> (see instructions) . Total of all amounts reported on line			-12	,500.) 2 <b>3</b> a		600.		)
zsa b	Total of all amounts reported on line				23a		000.		
b C	Total of all amounts reported on line		51 1100		230 23c				
d	Total of all amounts reported on line		• •		23c				
e	Total of all amounts reported on line		• •		23u		,100.		
24	<b>Income.</b> Add positive amounts sho		t include	e anv losse			. 24		
25	Losses. Add royalty losses from line 2			-		al losses here		(	12,500.)
26	Total rental real estate and royal								,,
20	here. If Parts II, III, IV, and line 40								
	Schedule 1 (Form 1040), line 5. Oth						. 26		-12,500.

Form	8889
Depar	tment of the Treasury

# Health Savings Accounts (HSAs)

OMB No. 1545-0074 2021

Attachment Sequence No. **52** 

Attach to Form 1040, 1040-SR, or 1040-NR.

► Go to www.irs.gov/Form8889 for instructions and the latest information.

Internal Revenue Service

Name(s) shown on Form 1040, 1040-SR, or 1040-NR	Social security number of HSA
	beneficiary. If both spouses have HSAs, see instructions ► 805-52-2156

Before you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if required.

Part	HSA Contributions and Deduction. See the instructions before completing this part. If y and both you and your spouse each have separate HSAs, complete a separate Part I for		
		each	spouse.
1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2021. See instructions		only Eamily
2	HSA contributions you made for 2021 (or those made on your behalf), including those made from January 1, 2022, through April 15, 2022, that were for 2021. <b>Do not</b> include employer contributions, contributions through a cafeteria plan, or rollovers. See instructions	2	0.
3	If you were under age 55 at the end of 2021 and, on the first day of <b>every</b> month during 2021, you were, or were considered, an eligible individual with the <b>same</b> coverage, enter \$3,600 (\$7,200 for family coverage). <b>All others,</b> see the instructions for the amount to enter	3	3,600.
4	Enter the amount you and your employer contributed to your Archer MSAs for 2021 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2021, also include any amount contributed to your spouse's Archer MSAs	4	0.
5	Subtract line 4 from line 3. If zero or less, enter -0	5	3,600.
6	Enter the amount from line 5. But if you and your spouse each have separate HSAs and had family coverage under an HDHP at any time during 2021, see the instructions for the amount to enter	6	3,600.
7	If you were age 55 or older at the end of 2021, married, and you or your spouse had family coverage under an HDHP at any time during 2021, enter your additional contribution amount. See instructions	7	0.
8	Add lines 6 and 7	8	3,600.
9	Employer contributions made to your HSAs for 2021 9 350.		
10	Qualified HSA funding distributions	1	
11	Add lines 9 and 10	11	350.
12	Subtract line 11 from line 8. If zero or less, enter -0	12	3,250.
13	HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 13	13	0.
	Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instructions.		
Part	<b>II HSA Distributions.</b> If you are filing jointly and both you and your spouse each have sepa a separate Part II for each spouse.	arate ⊦	ISAs, complete
14a	Total distributions you received in 2021 from all HSAs (see instructions)	14a	
b	Distributions included on line 14a that you rolled over to another HSA. Also include any excess contributions (and the earnings on those excess contributions) included on line 14a that were withdrawn by the due date of your return. See instructions	14b 14c	
C 15	Qualified medical expenses paid using HSA distributions (see instructions)	140	
15		15	
16	Taxable HSA distributions.       Subtract line 15 from line 14c. If zero or less, enter -0 Also, include this amount in the total on Schedule 1 (Form 1040), Part I, line 8e.	16	
17a	If any of the distributions included on line 16 meet any of the <b>Exceptions to the Additional 20% Tax</b> (see instructions), check here		
	Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on line 16 that are subject to the additional 20% tax. Also, include this amount in the total on Schedule 2 (Form 1040), Part II, line 17c	17b	
Part	•		
	completing this part. If you are filing jointly and both you and your spouse each have sep complete a separate Part III for each spouse.	arate	HSAs,
18	Last-month rule	18	
19	Qualified HSA funding distribution	19	
20	Total income. Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I, line 8z, and enter "HSA" and the amount on the dotted line	20	
21	Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form		
	1040), Part II, line 17d	21	

For Paperwork Reduction Act Notice, see your tax return instructions.

Form <b>8582</b>
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Department of the Treasury

Internal Revenue Service (99) Name(s) shown on return

## **Passive Activity Loss Limitations**

► See separate instructions.

► Attach to Form 1040, 1040-SR, or 1041.

▶ Go to www.irs.gov/Form8582 for instructions and the latest information.

OMB No. 1545-1008

-12,500.

Identifying number 805-52-2156

1d

1c (

MAHESH RAVI 805-					-2156
Par	t I 2021 Passive Activity Loss				
	Caution: Complete Parts IV and V before completing Part I.				-
Renta Allow					
1a	Activities with net income (enter the amount from Part IV, column (a))	1a	0.		
b	Activities with net loss (enter the amount from Part IV, column (b))	1b	( 12,500.)		

ΔII	Other	Passive	Activities
	Culei	1 033170	ACUVILES

2a	Activities with net income (enter the amount from Part V, column (a))	2a		
b	Activities with net loss (enter the amount from Part V, column (b))	2b ( )		
С	Prior years' unallowed losses (enter the amount from Part V, column (c))	2c ( )		
d	Combine lines 2a, 2b, and 2c		2d	
3	Combine lines 1d and 2d. If this line is zero or more, stop here and include this f all losses are allowed, including any prior year unallowed losses entered on line			

If line 3 is a loss and: • Line 1d is a loss, go to Part II.

c Prior years' unallowed losses (enter the amount from Part IV, column (c)) . .

• Line 2d is a loss (and line 1d is zero or more), skip Part II and go to line 10.

**Caution:** If your filing status is married filing separately and you lived with your spouse at any time during the year, **do not** complete Part II. Instead, go to line 10.

Par	Part II Special Allowance for Rental Real Estate Activities With Active Participation							
	Note: Enter all numbers in Part II as positive amounts. See instructions for an example.							
4	Enter the smaller of the loss on line 1	d or the loss on lir	ne3			4	12,500.	
5	<b>5</b> Enter \$150,000. If married filing separately, see instructions <b>5</b> 150,000.							
6	Enter modified adjusted gross income	e, but not less thar	n zero. See instruc	tions 6	L20,703.			
	<b>Note:</b> If line 6 is greater than or equal on line 9. Otherwise, go to line 7.	to line 5, skip line	s 7 and 8 and ent	er -0-				
7	Subtract line 6 from line 5			7	29,297.			
8	Multiply line 7 by 50% (0.50). Do not e	nter more than \$25	,000. If married filir	ng separately, see	instructions	8	14,649.	
<b>9</b> Enter the <b>smaller</b> of line 4 or line 8					9	12,500.		
Par	t III Total Losses Allowed							
10	Add the income, if any, on lines 1a an	d 2a and enter the	etotal			10	0.	
11	Total losses allowed from all passiv	e activities for 20	21. Add lines 9 an	d 10. See instruc	tions to find			
	out how to report the losses on your t	ax return				11	12,500.	
Par	t IV Complete This Part Before	e Part I, Lines 1	<b>a, 1b, and 1c.</b> S	ee instructions.				
					rall ga	ain or loss		
	Name of activity	(a) Net income (line 1a)	<b>(b)</b> Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gair	ı	<b>(e)</b> Loss	
VIV	EKANANDHA NAGAR	0.	12,500.				12,500.	

For Denergy and Deduction Act Nation and instru				-	0500 /0
Total. Enter on Part I, lines 1a, 1b, and 1c ►	0.	12,500.			

For Paperwork Reduction Act Notice, see instructions. BAA

REV 02/11/22 PRO

Form 8582 (2021)

### Part V Complete This Part Before Part I, Lines 2a, 2b, and 2c. See instructions.

Part V Complete mis Part Del	ore Fart I, Lines 2	a, 20,			JUONS.				
Name of activity	Currer	Current year			Prior years		Overall gain or loss		
	(a) Net income (line 2a)	(b) Net loss (line 2b)		(c) Unallowed loss (line 2c)		<b>(d)</b> Gain		(e) Loss	
	(inte za)	(11)	116 2.0)	1033 (111	620)				
Total. Enter on Part I, lines 2a, 2b, and 2c									
Part VI Use This Part if an Amo	ount Is Shown on I	Part II,	, <b>Line 9.</b> S	ee instruc	ctions.				
	Form or schedule								
Name of activity	and line number	<b>(a)</b> Loss		<b>(b)</b> Ratio		(c) Special allowance		(d) Subtract column (c) from	
Name of activity	to be reported on							column (a).	
	(see instructions)								
VIVEKANANDHA NAGAR	E Ln 22		12,500.	1.00000000		12,500.		0.	
Total			12,500.	1.0	<b>n</b>	12,50	\	0.	
Part VII Allocation of Unallowed		uction	12,500. s	1.0	0	12,50	. 00	0.	
Allocation of onallowed									
	Form or sch and line nur			Loss (I		b) Ratio (c			
Name of activity	to be reporte	ed on	(a)					c) Unallowed loss	
	(see instruct	tions)							
Total		. 🕨				1.00			
Part VIII Allowed Losses. See in	structions.		1		1		1		
	Form or sch								
Name of activity	and line nur to be reporte				(b) Ur	allowed loss		c) Allowed loss	
	(see instruct								
	(	,							
							-		
							-		
Total		. 🕨							
			1		1		1		

REV 02/11/22 PRO

Form **8582** (2021)